



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Disability Services
Aging and Long-Term Support Administration
PO Box 45600, Olympia, WA 98504-5050

June 25, 2013

CERTIFIED MAIL 7007 1490 0003 4202 4427

Administrator
Colonial Court
13505 E. Broadway Avenue
Spokane Valley WA 99216

Assisted Living Facility License #1029
Licensee: Colonial Court Spokane, Inc.

IMPOSITION OF CIVIL FINE AND
IMPOSITION OF CONDITIONS ON A LICENSE

Dear Administrator:

This letter constitutes formal notice of the imposition of a civil fine and the imposition of conditions on the license for your assisted living facility, located at **E. 12016 Cataldo, Spokane, Washington**, by the State of Washington, Department of Social and Health Services, pursuant to Laws of 1998, Chapter 272 and RCW 18.20.190.

The civil fine is based on the following violations of the Revised Code of Washington (RCW) and/or the Washington Administrative Code (WAC) found by the department in your assisted living facility. These and other deficiencies are more fully described in the attached Statement of Deficiencies report completed by the department on June 10, 2013.

WAC 388-78A-2120(2)(a-b)(3)(a-b)(4) Monitoring residents' well-being. **\$3,000.00**
\$100.00 per day x 30 days

The facility failed to evaluate changes of condition and take appropriate action after residents had significant changes including infections and/or accidents, and failed to evaluate those changes to ensure interventions were in place to meet the residents' needs for two residents.

WAC 388-78A-2660(1) Resident rights.

\$200.00
\$100.00 x 2 residents

The facility failed to provide written notice of discharge from the facility, the reason for discharge, the effective date, location to which the residents were being discharged to, or the name, address, and telephone number of the state long-term care ombudsman to two residents who were told they were being discharged.

WAC 388-78A-2660(2) Resident rights.

\$200.00
\$100.00 x 2 residents

The facility failed to ensure staff provided an environment that maintained each resident's dignity and respect in full recognition of his or her individuality, and accommodated care and services based on changing needs for two residents.

WAC 388-78A-2700(2)(c)(i)(ii)(iii) Safety measures and disaster preparedness.

\$500.00
\$100.00 x 5 days
May 30, 2013 to June 3, 2013

The facility failed to ensure investigations of allegations of suspected neglect or abuse by a staff member, alleged by one resident, was thoroughly and timely completed to determine the circumstances of the event; or instituted appropriate measures to prevent similar future situations, including protection of other residents during the course of the investigation.

The conditions are based on violations of the Revised Code of Washington (RCW) and Washington Administrative Code (WAC) regulations found by the department at your adult family home. These and other deficiencies are more fully described in the attached Statement of Deficiencies report completed by the department on June 10, 2013.

WAC 388-78A-2700(2)(c)(i)(ii)(iii) Safety measures and disaster preparedness.

The facility failed to ensure investigations of allegations of suspected neglect or abuse by a staff member, alleged by one resident, was thoroughly and timely completed to determine the circumstances of the event; or instituted appropriate measures to prevent similar future situations, including protection of other residents during the course of the investigation.

The department has determined that the following conditions shall be placed on your adult family home license:

- *The facility must hire an outside consultant, not currently associated with the facility, at their own expense, to train all staff, including the administrator on recognizing and identifying abuse and neglect.*

- *All staff must receive training by the consultant on mandatory reporting requirements as detailed in the “Boarding Home Guidebook, Partners in Protection” manual dated July 2011.*
- *All staff must take the mandatory reporting requirements training by August 1, 2013.*
- *The consultant must be available to the department for questioning.*
- *The licensee must post the license with the enclosed Notice of Conditions of Operation in the assisted living facility in a location accessible to residents and visitors.*

The effective date of the conditions on your license is **June 25, 2013**. As provided in RCW 70.128.160(4), WAC 388-76-10990 (7), the effective date of the conditions on your license will not be postponed pending an administrative hearing or informal dispute resolution review.

Plan of Correction/Attestation

You Must:

Return the plan, on the enclosed report, within 10 calendar days after you receive this letter. Include the following in your plan for each deficiency:

- The date you have or will correct each deficiency; and
- Provide a signature and date certifying that you have or will take corrective measures to correct each cited deficiency.

Send your plan to:

Elena Madrid, Field Manager
District 1, Unit A
316 West Boone, Suite 170
Spokane, WA 99201-2351
Phone: (509) 323-7316 / Fax: (509) 329-3993

You may contest the civil fine by requesting an administrative hearing. To do so, the Office of Administrative Hearings must receive your written request for a hearing within twenty-eight (28) calendar days following receipt of this letter. A copy of this letter and a copy of the enclosed Statement of Deficiencies must be included with your request. Send your request to:

**Office of Administrative Hearings
PO Box 42489
Olympia, Washington 98504-2489**

If no hearing is requested, the fine is due twenty-eight (28) calendar days after receipt of this notice. Please remit a check for **\$3,900.00** payable to the Department of Social and H3900.ealth Services. The check should be sent to:

**DSHS Office of Financial Recovery
PO Box 9501
Olympia, Washington 98507-9501**

If payment has not been received within twenty-eight (28) calendar days after receipt of this notice, interest will begin to accrue on the balance at the rate of one percent per month. If you do not submit a hearing request or make payment within twenty-eight (28) calendar days, the balance due the department will be recovered.

As provided in RCW 18.20, you may request an informal dispute resolution review of enforcement actions initiated in response to a Statement of Deficiencies report. During the informal dispute resolution process you also have the right to present written evidence. A request for informal dispute resolution review will not change the deadline for you to request an administrative hearing. Informal dispute resolution review by the department is not binding in an administrative hearing.

To request an informal dispute resolution review, send your written request to:

**Informal Dispute Resolution Program Manager
Aging and Disability Services Administration
PO Box 45600
Olympia, Washington 98504-5600
Fax (360) 725-3225**

The written request should:

- Identify the citation and/or enforcement action that is disputed;
- Explain why the home is disputing the action;
- Indicate the type of dispute resolution process you prefer (direct meeting, telephone conference or documentation review); and,
- Be sent within 10 working days of your receipt of this notice.

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Colonial Court
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If you have any questions, please contact Field Manager Elena Madrid at (509) 323-7316.

Sincerely,

Lori Melchiori, Ph.D.
Assistant Director
Residential Care Services

Enclosure

cc: David Moon, Compliance Specialist
Field Manager, District 1, Unit A
RCS District Administrator, District 1
HCS Regional Administrator, Region 1
DDD Regional Administrator, Region 1
WA LTC Ombudsman
Area Agency on Aging, AAA- Spo
Office of Financial Recovery, Vendor Program Unit
Medicaid Fraud Control Unit
Judi Plesha, HCS
BAM